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Dated: October 18, 2007 Signature: Docket No.: 60425(72021) (PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Rajagopal Bakthavatchalam et al.

Application No.: 10/539,031

Filed: June 13, 2005

For:

ACID SUBSTITUTED QUINAZOLIN-4-

YLAMINE ANALOGUES

Confirmation No.: 2029

Art Unit: 1625

Examiner: N. Rahnami

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 CFR 1.97, Applicant(s) hereby make of record the following additional documents. A PTO Form SB/08 and a full copy of each of the documents required under 37 CFR 1.98(a)(2) accompany this statement.

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no other relevant information exists. Nor shall the citation of any document herein be construed per se as a representation that such document is prior art. Moreover, Applicant(s) understand(s) the Examiner will make an independent evaluation of the cited documents.

This Information Disclosure Statement is filed more than three months after the U.S. filing date, OR more than three months after the date of entry of the national stage of a PCT application, AND after the mailing date of the first Office Action on the merits, whichever occurs first, but before the mailing date of a Final Office Action or Notice of Allowance (37 CFR 1.97(c)).

10/19/2007 CCHAU1

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Application No.: 10/539,031 2 Docket No.: 60425(72021)

Please charge our Deposit Account No. 04-1105 in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1105, under Order No. 60425(72021). A duplicate copy of this paper is enclosed.

Dated: October 18, 2007

Respectfully submitted,

Mark D. Russett

Registration No.: 41,281

EDWARDS ANGELL PALMER & DODGE

LLP

P.O. Box 55874

Boston, Massachusetts 02205

(617) 239-0100

Attorneys/Agents For Applicant

OCT 18 2007

PTO/SB/21 (10-07)
Approved for use through 10/31/2007. OMB 0651-0031
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 10/539,031-Conf. #2029

Filing Date June 13, 2005

First Named Inventor Rajagopal Bakthavatchalam

Art Unit 1625

Examiner Name N. Rahmani

Attorney Docket Number 60425(72021)

Total Number of Pages in This Submission ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Petition x | Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information **Provisional Application** Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address X Other Enclosure(s) (please Identify below): **Extension of Time Request** Terminal Disclaimer Form SB/08 **Express Abandonment Request** Request for Refund Copies of 15 references Charge \$180.00 to deposit account CD, Number of CD(s) x Information Disclosure Statement Certificate of Express Mailing Return Receipt Postcard Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name EDWARDS ANGELL PALMER & DODGE LLP Signature Printed name Mark D. Russett Date Reg. No. October 18, 2007 41,281

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MS Amendment, Commissioner for Patents	, P.O. Box 1450, Alexandria, VA 223 3-1450 Signature:	
Dated: October 18, 2007	Signature:	(Maxine Griffith)

Application No. (if known): 10/539,031

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Amendment and Response to Non-Final Office Action (23 pages)
Supplemental Information Disclosure Statement (2 pages)
Transmittal Form (1 page)
Charge \$180.00 to deposit account 04-1105
Fee Transmittal (1 page)
Copies of 15 References

Form SB/08 (2 pages) Return Receipt Postcard

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Effective on 12/08/2004

FEE TRANSMITTAL FOR FY 2007 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 180.00 Attorney Docket No. 60425(72021) METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee gee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fee
For FY 2007 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Art Unit N. Rahmani 1625 Art Unit N. Rahmani 160425(72021) METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account, Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Receipt for the filing fee Small Entity Fee(s) Index 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Small Entity Pee (\$) Fee (\$
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TOTAL AMOUNT OF PAYMENT (\$) 180.00 Attomey Docket No. 60425(72021) METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number, 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee of the fi
METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fee
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number O4-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP
Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP
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Tee (s) under 37 CFR 1.16 and 1.17
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (\$)
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Note
Multiple dependent claims Fee (\$) Fee (\$
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Design 200 100 100 50 130 65
Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Small Entity Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Pee (\$) Pee (\$) Pee (\$) Pee (\$) Multiple Dependent Claims Total Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims -20 = x = Fee (\$) Fee (\$) Fee (\$) Fee Paid (\$)
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Indep. Claims
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HP = highest number of independent claims paid for, if greater than 3.
3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)
100 = /50 = (round up to a whole number) x =
4. OTHER FEE(S) Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): 1806 Supplemental Information Disclosure Statement 180.00
SUBMITTED BY
Signature Registration No. (Altomey/Agent) 41,281 Telephone (617) 239-0100
Name (Print/Type) Mark D. Russett Date October 18, 2007

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MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 223 3-1450

Dated: September 18, 2007

Signature:

(Maxine Griffith)